

# **Medaille College** MEDAILLE SUMMER THEATRE 2019 REGISTRATION FORM

*For multiple siblings, please fill out one form per student.*

STUDENT NAME (first name, last name)		DATE OF BIRTH	
HOME PHONE	PARENT/GUARDIAN CELL	PARENT/GUARDIAN WORK	
HOME ADDRESS	CITY	STATE	ZIP
PARENT/GUARDIAN EMAIL (Registration confirmation will be emailed here)			
EMERGENCY CONTACT NAME		PRIMARY EMERGENCY PHONE	
RELATIONSHIP TO STUDENT			

This student has the following special needs: (Consider medications, allergies, medical or physical conditions, and anything else that will help us serve your student.)

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**MEDAILLE SUMMER THEATRE Registration & Payment Information (please circle)**

Cost: \$400 (3-week session) / \$350 (Medaille Family rate) \$25 discount with referral code: \_\_\_\_\_

**OPTIONAL Daily Lunch Plan (please circle)**

Cost: \$105 (3 weeks/15 meals) / \$70 (2 weeks/10 meals)

**SELECT ONE:**

Standard Plan \_\_\_\_\_ Vegetarian Plan \_\_\_\_\_

**TOTAL AMOUNT TO CHARGE:**

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Please make checks out to Medaille Summer Theatre.

**Send your registration form and payment to:**

Medaille Summer Theatre  
 Medaille College  
 18 Agassiz Circle  
 Buffalo, NY 14214



**IMAGE CONSENT**

*I agree that Medaille Summer Theatre may record and use my child's likeness (represented by photo or video) in the creation of student work and in the routine promotion and archival presentation of the MST program.*

\_\_\_\_\_  
 PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
 DATE

\_\_\_\_\_  
 PRINT NAME

**GUIDELINES & POLICIES:**

**Medical Withdrawals / Absences:** MST offers no refund or credit except for documented medical conditions. You must submit a withdrawal form and documentation on physician's letterhead. Medical withdrawals must be submitted before the last day of camp. Tuition will be refunded less the \$25 processing fee. MST offers no refund or credit for missed camp days due to illness, schedule conflicts or any other reason.

**Medical Authorization:** Required from a physician for students who require medication during the camp day.

**Attendance & Behavior:** Consistent

attendance is key to a successful MST. Absences are discouraged, especially in the final week of camp (7/22-7/26). MST fosters a positive, mutually supportive environment within its student ensemble. Students and faculty treat each other with dignity, kindness and respect. Good behavior is naturally expected. MST reserves the right to permanently dismiss any student that does not cooperate or behave.

**MST Content Advisory:** While plays developed in MST feature no explicit content, subjects relevant to the age group may be addressed implicitly and with sensitivity. Work featured in

MST's final show will be appropriate for the age range of the student artists (the rough equivalent of a PG-13 rated movie). MST faculty nurtures and closely evaluates the ability of students to express themselves responsibly and asks parents to trust our judgment. In the case of potentially controversial content, student material is forwarded to a volunteer panel of parents for a majority opinion. All interested parents are invited to participate in this process.

**Documentation of Student Work:** MST will be documented through photography and videography for

promotional and archival purposes. Students may also participate in the creation of original work that requires videography of their performances for presentation at the final show. Parents should expect students' images and/or voices will be recorded and distributed for MST promotional or archival purposes.

To register by email or for general information, email MST director Jon Elston at [jbe35@medaille.edu](mailto:jbe35@medaille.edu).

For inquiries by phone, please call Dr. Daniel P. Kotzin, Associate Professor, Interdisciplinary Studies Department (Medaille College), at (716) 880-2318.

**RELEASE/WAIVER PARENT/GUARDIAN AGREEMENT REQUIRED FOR REGISTRATION**

*I have read and agree to ALL policies listed to the left.*

\_\_\_\_\_  
 PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
 DATE

*I permit the following people to pick up my child:*

\_\_\_\_\_  
 NAME/RELATIONSHIP TO STUDENT